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UTILITY PATENT APPLICATION TRANSMITTAL

(Only for new nonprovisional applications under 37 CFR 1.53(b))

| | |
|--|---|
| Attorney Docket No. | 98RSS181 |
| First Named Inventor or Application Identifier | Kusumo-Rahardjo, et al. |
| Title | An Image Processor that Performs Edge Enhancement Using a Dynamic Threshold |
| Express Mail Label No. | E1075599251US |

PRO

APPLICATION ELEMENTS

See MPEP Chapter 600 concerning utility patent application contents

1. Fee Transmittal Form (e.g., PTO/SB/17)
(Submit an original, and a duplicate for fee processing)

2. Specification
(preferred arrangement set forth below)

- Descriptive title of the Invention
- Cross References to Related Applications
- Statement Regarding Fed sponsored R&D
- Reference to Microfiche Appendix
- Background of the Invention
- Brief Summary of the Invention
- Brief Description of the Drawings (if filed)
- Detailed Description
- Claim(s)
- Abstract of the Disclosure

[Total Pages

24

]

3. Drawing(s) (35 USC d113)

[Total Sheets

7

]

4. Oath or Declaration
(including Supplemental Declaration)

[Total Pages

3

]

a. Unexecuted

b. Copy from a prior application (37 CFR 1.63(d))
(for continuation/divisional with Box 17 completed)

[Note Box 5 below]

i. **DELETION OF INVENTOR(S)**

Signed statement attached deleting inventor(s)
named in the prior application,
see 37 CFR 1.63(d)(2) and 1.33(b).

5. Incorporation By Reference (useable if Box 4b is checked)

The entire disclosure of the prior application, from which a copy of
the oath or declaration is supplied under Box 4b, is considered as
being part of the disclosure of the accompanying application and is
hereby incorporated by reference therein.

17. If a CONTINUING APPLICATION, check appropriate box and supply the requisite information below and in a preliminary amendment:

 Continuation Divisional Continuation-in-part (CIP)

of prior application No: _____

Prior application information: Examiner _____

Group / Art Unit: _____

18. CORRESPONDENCE ADDRESS



Customer Number or Bar Code Label

(Insert Customer No. or Attach bar code label here)



Correspondence address below

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|-------------------|--|-----------------------------------|---------|
| Name (Print/Type) | James D. Bennett | Registration No. (Attorney/Agent) | 37,550 |
| Signature |  | | Date |
| | | | 4/13/99 |

Burden Hour Statement: This form is estimated to take 2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Box Patent Application, Washington, DC 20231.